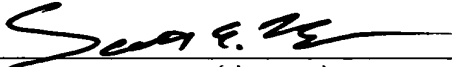




PATENT

CERTIFICATE OF MAILING

I hereby certify that this document is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner For Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date set forth below.


(signature)

Date of signature and deposit - 7/28/03

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	Confirmation No. 3455
Joseph v. Bak et al.)	
)	Group Art Unit 1725
Serial No. 09/827,046)	
)	Examiner Pittman, Zidia T.
Filed: April 5, 2001)	
)	
For: DIFFUSION BONDED TOOLING)	Attorney Docket 82091
WITH CONFORMAL COOLING)	


Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Honorable Sir:

Please amend the above-identified application as indicated on the following pages.

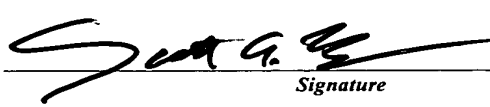

Respectfully submitted,



Scott A. Blake
Reg. No. 40,515

MacMillan, Sobanski & Todd, LLC
One Maritime Plaza, Fourth Floor
720 Water Street
Toledo, Ohio 43604
(419) 255-5900

1725
9

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. 1-82091	
Applicant(s): Joseph V. Bak et al.					
Serial No. 09/827,046	Filing Date April 5, 2003		Examiner Zidia T. Pittman		Group Art Unit 1725
Invention: DIFFUSION BONDED TOOLING WITH CONFORMAL COOLING					
<u>TO THE COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	17 -	30 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	2 -	3 =	0 x	\$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
 <input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 13-0005 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 Signature Scott A. Blake, Reg. No. 40,515 MacMillan, Sobanski & Todd, LLC One Maritime Plaza, Fourth Floor 720 Water Street Toledo, Ohio 43604 Telephone: (419) 255-5900 Facsimile: (419) 255-9639 Email: blake@mstfirm.com			Dated: July 28, 2003		
cc:			<div>I certify that this document and fee is being deposited on July 28, 2003 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</div> <div style="text-align: center;"> Signature of Person Mailing Correspondence</div> <div style="text-align: center;">Toni Bosch Typed or Printed Name of Person Mailing Correspondence</div>		